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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/017,439
	Filing Date	December 14, 2001
	First Named Inventor	Jeffrey A. Horan
	Art Unit	2166
	Examiner Name	M. Ali
	Attorney Docket Number	20910/0206023-US0

To: **Commissioner for Patents**
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Per 37 CFR 10.40(c)(5), the practitioner's client knowingly and freely assents to this termination of employment as another practitioner has been engaged to prosecute this patent application.

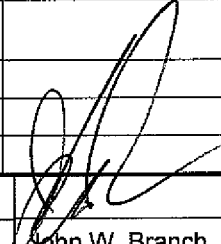
CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☒ The address associated with Customer Number:

OR

☐ Firm or
Individual Name

Address			
City	State	Zip	
Country			
Telephone	Email		
Signature			
Name	John W. Branch	Registration No.	41,633
Date	April 18, 2008	Telephone No.	206-262-8906

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.